PTO/SB/05 (03-01) Approved for use through 10/31/2002. OMB 0651-0032

PATENT APPLICATION TRANSMITTAL Attorney Dock First Inventor Tritle Diff

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. First Inventor		740145-216						
		Yoshiki MIMURA et al.						
Title		DEVICE FOR EXPOSURE OF A PERIPHERAL AREA OF A FILM CIRCUIT						

	Ex	xpress Mail Label No) .					
APPLICATION ELEM	MENTS	Commissioner for Patents ADDRESS TO: Box Patent Application Washington DC 20231						
See MPEP chapter 600 concerning utility pate.	nt application contents							
 E Fee Transmittal Form (e.g., PTO/SB/1 (Submit an original and a duplicate for fee process) Applicant claims small entity status. See 37 CFR 1.27. E Specification [Total Pages (preferred arrangement set forth below) Descriptive title of the invention Cross Reference to Related Applic Statement Regarding Fed sponsore Reference to sequence listing, a tal 	7) ng) 16] sations (if applicable) ed R & D (if applicable) ole,	Washington, DC 20231 7. □ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. □ Computer Readable Form (CRF) b. Specification Sequence Listing on: i. □ CD-ROM or CD-R (2 copies; or ii. □ paper c. □ Statements verifying identity of above copies						
or a computer program listing apportunity of the Invention	endix (if applicable)	ACCOM	IPANYING A	PPLICATI	ON PARTS			
- Brief Summary of the Invention - Brief Description of the Drawings - Detailed Description - Claim(s) - Abstract of the Disclosure 4. Example Drawing(s) (35 U.S.C. 113) [Tot	al Sheets 7] al Pages 1] CFR 1.63(d)) ox 18 completed) S1 sting inventor(s) see 37 CFR	9. Assignment Papers (cover sheet & document(s)) 10. □ 37 CFR 3.73(b) Statement □ Power of (when there is an assignee) Attorney 11. □ English Translation Document (if applicable) 12. □ Information Disclosure □ Copies of IDS Statement (IDS)/PTO-1449 Citations 13. □ Preliminary Amendment 14. ☑ Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. ☑ Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. □ Nonpublication request under 35 U.S.C. 122(b)(2)(B)(i) Applicant must attach form PTO/SB/35 or its equivalent. 17. □ Other:						
18. If a CONTINUING APPLICATION, che	ck appropriate box and suppl	v the requisite inform	action helow a	nd in a prol	iminary amandment			
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.: Prior application information: Examiner Group / Art Unit. For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The necorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.								
	19. CORRESPONDEN	CE ADDRESS						
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Name	and the second s							
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City	State		Zıp Code		•			
Country	Telephone		Fax					
Name (Print/Type) David S. Safran	Registration No. (Attorney/Agent)		27,9	997			
Signature	(Jan)		Date	Decemb	per 21, 2001			

PTO/SB/17 (11-00) Approved for use through 10/31/2002. OMB 0651-0032

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\mathbf{F}	OR	FY	200	1

Complete if Known Application Number New Application December 21, 2001 Filing Date First Named Inventor Yoshiki MIMURA et al. Examiner Name Unknown Group Art Unit Unknown Attorney Docket No. 740145-216

Date

December 21, 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$)780.00

METHOD OF PAYMENT				FEE CALCULATION (continued)										
1. E The Commissioner is hereby authorized to charge indicated			3. ADDITIONAL FEES											
fees and credit any overpayments to:			В	Entit	Large Entity		l y							
Deposit Account Number	19-2380	0(740	145-216)		Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Desc			Fee Paid		
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Charge	Any Addition	nal Fee	Required		147	2,520	147		For filing a request					
	37 CFR 1.16				112	920*	112		* Requesting publica					
Applica	nt claims sm	all entit	y status.		1	1,840*	113		* Requesting publica					
	CFR 1 27				115	110	215		Extension for reply					
	ent Enclose	d:			116	400	200		Extension for reply					
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	PPE	CAL	Order	·	118 128	1,440 1,960	720 228				within fourth month			
1. BASIC FIL		CAL	CULATION		119	320	219		Notice of Appeal	within fifth flow	othin fifth month			
Large Entity	Small En	tity			120	320	220		Filing a brief in sup	port of an appeal				
Fee Fee		ee	Fee Description	Fee Paid	121	280	221	140	Request for oral hea	aring		ļ		
Code (\$)	Code (\$		Utility filing fee	740.00	138	1,510	138	1,510	Petition to institute	a public use proce				
106 330	206 16		Design filing fee	7.0.00	140	110	240		Petition to revive -	-				
107 510	207 25		Plant filing fee		141	1,280	241 640 Petition to revive – unintentional							
108 740	208 37	70	Reissue filing fee		142 1,280 242 640 Utility issue fee (or reissue)									
T14 160	214 8	30	Provisional filing fee	L	143	460	243		Design issue fee					
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2. EXTRA CL	AIM FEE:	S	F 6		123	50	123		Processing fee unde		- D44	ļ		
Fee from Extra Claims below Fee Paid				126	180	30 126	180	Submission of Info	mation Disclosur	e Strii				
Total Claims 6 $-20** = 0$ $X 18.00 = 0$		= 0	581	40	581	40	40 Recording each patent assignment per property (times number of properties)			40.00				
Independent 1 -3** = 0 X 84.00 = 0			= 0	146	740	246	370	Filing a submission § 1.129(a))						
Multiple Depende	ent		280	= 0	149	740	249		For each additional § 1 29(b))		•			
Large Entity Fee Fee	Small En Fee F	itity 'ee	Fee Description		179	740	279	370	Request for Contin	ued Examination	(RCE)			
Code	(\$) Cod		(\$)		169	900	169	900	Request for expedit	ted examination o	f a design			
103 18		9	Claims in excess of 20		Other	fee (spe	cify)_	_	-					
102 84		42 40	Independent claims in											
104 280	204 14		Multiple dependent cla	-	* Rec	luced by	Basic F	iling F	ee Paid	SUBTOTAL (3)	(\$)40.00			
109 84	209 4	12	** Reissue independen original patent	t claims over	1									
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**or number previously paid, if greater; For Reissues, see above				<u> </u>										
SUBMITTED BY									Complete (if a	applicable)				
Name (Print/T)		Day	id S. Safran	$\sqrt{1}$		stration		27	,997	Telephone	703-790-9110			
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